

United States Bankruptcy Court for the:

Southern District of New York

Case number (If known): _____ Chapter you are filing under:

- Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

Check if this is an
amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/20

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name

Kidville Opco, LLC

2. All other names debtor used
in the last 8 years

Include any assumed names,
trade names, and *doing business*
as names

3. Debtor's federal Employer
Identification Number (EIN)

84-4152598

4. Debtor's address

Principal place of business

Mailing address, if different from principal place
of business

PO Box 3827

Number Street

P.O. Box

New York NY 10163

City State ZIP Code

Number Street

City State ZIP Code

County

Rye NY 10580

City State ZIP Code

5. Debtor's website (URL)

www.kidville.com

6. Type of debtor

Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

Partnership (excluding LLP)

Other. Specify: _____

Debtor	Kidville Opco, LLC Name _____		Case number (if known) _____
7. Describe debtor's business			
<p>A. Check one:</p> <p><input type="checkbox"/> Health Care Business (as defined in 11 U.S.C. § 101(27A)) <input type="checkbox"/> Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) <input type="checkbox"/> Railroad (as defined in 11 U.S.C. § 101(44)) <input type="checkbox"/> Stockbroker (as defined in 11 U.S.C. § 101(53A)) <input type="checkbox"/> Commodity Broker (as defined in 11 U.S.C. § 101(6)) <input type="checkbox"/> Clearing Bank (as defined in 11 U.S.C. § 781(3)) <input checked="" type="checkbox"/> None of the above</p>			
<p>B. Check all that apply:</p> <p><input type="checkbox"/> Tax-exempt entity (as described in 26 U.S.C. § 501) <input type="checkbox"/> Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3) <input type="checkbox"/> Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))</p>			
<p>C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See http://www.naics.com/search/.</p> <p style="text-align: center;"><u>6116</u></p>			
<p>8. Under which chapter of the Bankruptcy Code is the debtor filing?</p> <p>Check one:</p> <p><input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11. Check all that apply:</p> <p><input type="checkbox"/> The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).</p> <p><input type="checkbox"/> The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, and it chooses to proceed under Subchapter V of Chapter 11. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).</p> <p><input type="checkbox"/> A plan is being filed with this petition.</p> <p><input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).</p> <p><input type="checkbox"/> The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the <i>Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11</i> (Official Form 201A) with this form.</p> <p><input type="checkbox"/> The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.</p> <p><input type="checkbox"/> Chapter 12</p>			
<p>9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?</p> <p>If more than 2 cases, attach a separate list.</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. District _____ When _____ Case number _____ MM / DD / YYYY</p> <p>District _____ When _____ Case number _____ MM / DD / YYYY</p>			
<p>10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?</p> <p>List all cases. If more than 1, attach a separate list.</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Debtor <u>Kidville Franchise Company, LLC</u> Relationship <u>Affiliate</u> District <u>SDNY</u> When <u>08/08/2020</u> Case number, if known _____ MM / DD / YYYY</p>			

Debtor Kidville Opco, LLC
Name _____

Case number (if known) _____

11. Why is the case filed in this district? Check all that apply:

- Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

No

Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

- It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard? _____
- It needs to be physically secured or protected from the weather.
- It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- Other _____

Where is the property? _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Is the property insured?

No

Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- Funds will be available for distribution to unsecured creditors.
- After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

- | | | |
|---|--|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input checked="" type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. Estimated assets

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Debtor	Kidville OpcO, LLC		Case number (if known)
	Name		
16. Estimated liabilities	<input type="checkbox"/> \$0-\$50,000 <input type="checkbox"/> \$50,001-\$100,000 <input checked="" type="checkbox"/> \$100,001-\$500,000 <input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$1,000,001-\$10 million <input type="checkbox"/> \$10,000,001-\$50 million <input type="checkbox"/> \$50,000,001-\$100 million <input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> \$500,000,001-\$1 billion <input type="checkbox"/> \$1,000,000,001-\$10 billion <input type="checkbox"/> \$10,000,000,001-\$50 billion <input type="checkbox"/> More than \$50 billion

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 08/08/2020
MM / DD / YYYY

/s/ Harry R. Harwood Jr.

Signature of authorized representative of debtor

Harry R. Harwood Jr.

Printed name

Title Authorized Signatory

18. Signature of attorney

/s/ Elise S. Frejka

Signature of attorney for debtor

Date 08/08/2020

MM / DD / YYYY

Elise S. Frejka

Printed name

Frejka PLLC

Firm name

420 Lexington Avenue Suite 310

Number Street

New York

City

(212) 641-0800

Contact phone

NY 10170

State ZIP Code

efrejka@frejka.com

Email address

EF6896

Bar number

NY

State

Debtor _____ Case number (*if known*) _____

Continuation Sheet for Official Form 201

10) Pending Bankruptcies

Kidville NY, LLC	SDNY	08/08/2020
Kidville Bethesda, LLC	SDNY	08/08/2020
Kidville Union Square, LLC	SDNY	08/08/2020
Kidville Garden City, LLC	SDNY	08/08/2020
Kidville Lincoln Park, LLC	SDNY	08/08/2020
Kidville Brentwood, LLC	SDNY	08/08/2020

Fill in this information to identify the case:

Debtor name	Kidville Opco, LLC
United States Bankruptcy Court for the:	Southern District of New York
Case number (If known):	(State)

Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B*

\$ 0.00

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*

\$ 8,792.35

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*

\$ 8,792.35

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*

\$ 0.00

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 6a of *Schedule E/F*

\$ 2,177.84

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 6b of *Schedule E/F*

+\$ 496,798.02

4. **Total liabilities**

Lines 2 + 3a + 3b

\$ 498,975.86

Fill in this information to identify the case:

Debtor name Kidville Opco, LLC

United States Bankruptcy Court for the: Southern District of New York

Case number (if known): _____

 Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- No. Go to Part 2.
 Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor	Current value of debtor's interest		
2. Cash on hand	\$ 0.00		
3. Checking, savings, money market, or financial brokerage accounts (<i>Identify all</i>)			
Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. Customers Bank	Checking	3 8 3 5	\$ 3,992.61
3.2. JPMorgan Chase Bank N.A.	Checking	6 5 0 0	\$ 3,211.99
4. Other cash equivalents (<i>Identify all</i>)			
4.1. _____	\$ _____		
4.2. _____	\$ _____		
5. Total of Part 1	\$ 7,204.60		

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments**6. Does the debtor have any deposits or prepayments?**

- No. Go to Part 3.
 Yes. Fill in the information below.

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

Description, including name of holder of deposit	Current value of debtor's interest
7.1. _____	\$ _____
7.2. _____	\$ _____

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. Paycom - Payment for 2020 W2s \$ 1,587.75

8.2. _____ \$ _____

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ 1,587.75

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?** No. Go to Part 4. Yes. Fill in the information below.**Current value of debtor's interest****11. Accounts receivable**

11a. 90 days old or less: _____ - face amount _____ = → \$ _____

11b. Over 90 days old: _____ - face amount _____ = → \$ _____

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ _____

Part 4: Investments**13. Does the debtor own any investments?** No. Go to Part 5. Yes. Fill in the information below.**Valuation method used for current value****Current value of debtor's interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. _____ \$ _____
14.2. _____ \$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. Kidville Garden City, LLC 100 % \$ 0.00
15.2. See continuation sheet _____ % \$ 0.00

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____ \$ _____
16.2. _____ \$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ 0.00

Part 5: Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?** No. Go to Part 6. Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	-------------------------------------	--	---	------------------------------------

19. Raw materials

_____ MM / DD / YYYY \$ _____ \$ _____

20. Work in progress

_____ MM / DD / YYYY \$ _____ \$ _____

21. Finished goods, including goods held for resale

_____ MM / DD / YYYY \$ _____ \$ _____

22. Other inventory or supplies

_____ MM / DD / YYYY \$ _____ \$ _____

23. Total of Part 5

Add lines 19 through 22. Copy the total to line 84.

\$ _____

24. Is any of the property listed in Part 5 perishable?

- No
 Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- No
 Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- No
 Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?** No. Go to Part 7. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	--	---	------------------------------------

28. Crops—either planted or harvested

_____ \$ _____ \$ _____

29. Farm animals Examples: Livestock, poultry, farm-raised fish

_____ \$ _____ \$ _____

30. Farm machinery and equipment (Other than titled motor vehicles)

_____ \$ _____ \$ _____

31. Farm and fishing supplies, chemicals, and feed

_____ \$ _____ \$ _____

32. Other farming and fishing-related property not already listed in Part 6

_____ \$ _____ \$ _____

33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

\$ _____

34. Is the debtor a member of an agricultural cooperative?

No

Yes. Is any of the debtor's property stored at the cooperative?

No

Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

No

Yes. Book value \$ _____ Valuation method _____ Current value \$ _____

36. Is a depreciation schedule available for any of the property listed in Part 6?

No

Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

No

Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles**38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

No. Go to Part 8.

Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	--	---	------------------------------------

39. Office furniture

\$ _____

\$ _____

40. Office fixtures

\$ _____

\$ _____

41. Office equipment, including all computer equipment and communication systems equipment and software

\$ _____

\$ _____

42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

42.1 _____ \$ _____

42.2 _____ \$ _____

42.3 _____ \$ _____

\$ _____

\$ _____

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$ _____

44. Is a depreciation schedule available for any of the property listed in Part 7?

No

Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

No

Yes

Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?** No. Go to Part 9. Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---	--	--	---

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

47.1 _____	\$ _____	_____	\$ _____
47.2 _____	\$ _____	_____	\$ _____
47.3 _____	\$ _____	_____	\$ _____
47.4 _____	\$ _____	_____	\$ _____

48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____

49. Aircraft and accessories

49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____

**50. Other machinery, fixtures, and equipment
(excluding farm machinery and equipment)**

\$ _____	_____	\$ _____
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51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$ _____

52. Is a depreciation schedule available for any of the property listed in Part 8?

- No
 Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- No
 Yes

Part 9: Real property**54. Does the debtor own or lease any real property?** No. Go to Part 10. Yes. Fill in the information below.**55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1		\$ _____		\$ 0.00
55.2		\$ _____		\$ _____
55.3		\$ _____		\$ _____

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ 0.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

- No
 Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- No
 Yes

Part 10: Intangibles and intellectual property**59. Does the debtor have any interests in intangibles or intellectual property?** No. Go to Part 11. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets See Schedule A/B Part 10, Question 60 Attachment	\$ _____		Unknown \$ _____
61. Internet domain names and websites See Schedule A/B Part 10, Question 61 Attachment	\$ _____		Unknown \$ _____
62. Licenses, franchises, and royalties	\$ _____		\$ _____
63. Customer lists, mailing lists, or other compilations	\$ _____		\$ _____
64. Other intangibles, or intellectual property	\$ _____		\$ _____
65. Goodwill Goodwill associated with acquisition from Kidville Inc.	1,000,000.00 \$ _____		Unknown \$ _____
66. Total of Part 10.			0.00 \$ _____

Add lines 60 through 65. Copy the total to line 89.

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- No
 Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- No
 Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- No
 Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- No. Go to Part 12.
 Yes. Fill in the information below.

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

_____ - Total face amount → doubtful or uncollectible amount \$ _____

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

_____ Tax year _____
 _____ Tax year _____
 _____ Tax year _____ \$ _____

73. Interests in insurance policies or annuities

_____ \$ _____

74. Causes of action against third parties (whether or not a lawsuit has been filed)

_____ \$ _____

Nature of claim _____
 Amount requested \$ _____

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

_____ \$ _____

Nature of claim _____
 Amount requested \$ _____

76. Trusts, equitable or future interests in property

_____ \$ _____

77. Other property of any kind not already listed Examples: Season tickets, country club membership

_____ \$ _____
 _____ \$ _____

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ _____

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- No
 Yes

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ 7,204.60	
81. Deposits and prepayments. Copy line 9, Part 2.	\$ 1,587.75	
82. Accounts receivable. Copy line 12, Part 3.	\$ 0.00	
83. Investments. Copy line 17, Part 4.	\$ 0.00	
84. Inventory. Copy line 23, Part 5.	\$ 0.00	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$ 0.00	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$ 0.00	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$ 0.00	
88. Real property. Copy line 56, Part 9. →		\$ 0.00
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$ 0.00	
90. All other assets. Copy line 78, Part 11.	+ \$ 0.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 8,792.35	+ 91b. \$ 0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.	8,792.35	\$ 8,792.35

Kidville Opco, LLC

Debtor 1

First Name

Middle Name

Last Name

Case number (if known) _____

Continuation Sheet for Official Form 206 A/B**15) Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Kidville Franchise Company, LLC	100%	0.00
Kidville Lincoln Park, LLC	100%	0.00
Kidville NY, LLC	100%	0.00
Kidville Brentwood, LLC	100%	0.00
Kidville Union Square, LLC	100%	0.00
Kidville Bethesda, LLC	100%	0.00

Fill in this information to identify the case:

Debtor name Kidville Opco, LLC
 United States Bankruptcy Court for the: Southern District of New York
 Case number (If known): _____

Check if this is an amended filing

Official Form 206D**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.**1. Do any creditors have claims secured by debtor's property?**

- No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.**2.1 Creditor's name**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred _____

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?

- No
 Yes. Specify each creditor, including this creditor,

--

Describe debtor's property that is subject to a lien

Column A
Amount of claim
 Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

\$ _____ \$ _____

Describe the lien**Is the creditor an insider or related party?**

- No
 Yes

Is anyone else liable on this claim?

- No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
 Unliquidated
 Disputed

2.2 Creditor's name

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred _____

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?

- No
 Yes. Have you already specified the relative priority?
 No. Specify each creditor, including this creditor, and its relative priority.

--

Yes. The relative priority of creditors is specified on lines _____

Describe debtor's property that is subject to a lien

\$ _____ \$ _____

Describe the lien**Is the creditor an insider or related party?**

- No
 Yes

Is anyone else liable on this claim?

- No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
 Unliquidated
 Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$ _____

Fill in this information to identify the case:

Debtor	Kidville Opco, LLC
United States Bankruptcy Court for the:	Southern District of New York
Case number (If known)	

Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- No. Go to Part 2.
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address Adriana Gonzalez 40 Amsterdam Avenue Apt. 13F New York, NY, 10023	As of the petition filing date, the claim is: \$ 4.99 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 4.99
Date or dates debt was incurred 5/12/2020	Basis for the claim: Deposits by individuals	
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>7</u>)		
2.2 Priority creditor's name and mailing address Alma Leon 225 Willow Lane Valley Stream, NY, 11580	As of the petition filing date, the claim is: \$ 267.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 267.00
Date or dates debt was incurred 6/12/2020	Basis for the claim: Deposits by individuals	
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>7</u>)		
2.3 Priority creditor's name and mailing address Andrea Fiore 511 East 80th Street Apt. 9G New York, NY, 10075	As of the petition filing date, the claim is: \$ 7.47 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7.47
Date or dates debt was incurred 5/13/2020	Basis for the claim: Deposits by individuals	
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>7</u>)		

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim **Priority amount**

2. ⁴ Priority creditor's name and mailing address Aneliya Crawford 510 West 52nd Street Apt PH1H New York, NY, 10019	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 178.00	\$ 178.00
Date or dates debt was incurred 6/27/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ⁵ Priority creditor's name and mailing address Aysylu Mardanova 3311 Riverview Ave Englewood, NJ, 07631	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 19.92	\$ 19.92
Date or dates debt was incurred 05/18/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ⁶ Priority creditor's name and mailing address Camille Matlack 33 Caton Place Unit 3J Brooklyn, NY, 11218	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 31.99	\$ 31.99
Date or dates debt was incurred 7/20/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ⁷ Priority creditor's name and mailing address Camille Wynn 125 Delancey Street PH02 New York, NY, 10002	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 19.92	\$ 19.92
Date or dates debt was incurred 5/18/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.⁸ Priority creditor's name and mailing address \$ 89.00 \$ 89.00

Christina Giuliani
550 West 54th Street
Unit 31B
New York, NY, 10019

As of the petition filing date, the claim is:

- Check all that apply.*
- Contingent
 - Unliquidated
 - Disputed

Date or dates debt was incurred

6/24/2020

Basis for the claim:

Deposits by individuals

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

- No
- Yes

2.⁹ Priority creditor's name and mailing address \$ 9.96 \$ 9.96

Christine Hendon
2631 Arlington Ave
Bronx, NY, 10463

As of the petition filing date, the claim is:

- Check all that apply.*
- Contingent
 - Unliquidated
 - Disputed

Date or dates debt was incurred

7/14/2020

Basis for the claim:

Deposits by individuals

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

- No
- Yes

2.¹⁰ Priority creditor's name and mailing address \$ 15.98 \$ 15.98

Courtney McGraw
PO Box 146
Edgewater, NJ, 07020

As of the petition filing date, the claim is:

- Check all that apply.*
- Contingent
 - Unliquidated
 - Disputed

Date or dates debt was incurred

7/16/2020

Basis for the claim:

Deposits by individuals

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

- No
- Yes

2.¹¹ Priority creditor's name and mailing address \$ 133.50 \$ 133.50

Courtney Statfeld
305 East 86th Street
Apt. 22GW
New York, NY, 10028

As of the petition filing date, the claim is:

- Check all that apply.*
- Contingent
 - Unliquidated
 - Disputed

Date or dates debt was incurred

6/25/2020

Basis for the claim:

Deposits by individuals

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)

- No
- Yes

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim	Priority amount
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2. ¹² Priority creditor's name and mailing address Dana Mazo 100 Jay Street Unit 30D Brooklyn, NY, 11201	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7.47	\$ 7.47
Date or dates debt was incurred 05/13/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ¹³ Priority creditor's name and mailing address Darryl Chiang 940 Park Avenue Apt. 7B New York, NY, 10028	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 19.92	\$ 19.92
Date or dates debt was incurred 6/18/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ¹⁴ Priority creditor's name and mailing address David Choi 110 West 90th Street #5C New York, NY, 10024	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 9.96	\$ 9.96
Date or dates debt was incurred 6/14/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ¹⁵ Priority creditor's name and mailing address Emma Ye 408 W Main St Unit 3C Alhambra, CA, 91801	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 29.88	\$ 29.88
Date or dates debt was incurred 6/22/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim	Priority amount
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2. ¹⁶ Priority creditor's name and mailing address Ester Vallet 350 West 42nd St. Apt. 55D New York, NY, 10036	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 24.90	\$ 24.90
Date or dates debt was incurred 5/20/20	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ¹⁷ Priority creditor's name and mailing address Eva Bonime 180 West End Avenue Apt. 3F New York, NY, 10023	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 133.50	\$ 133.50
Date or dates debt was incurred 6/17/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ¹⁸ Priority creditor's name and mailing address Jason Hsu 150 East 37th Street Apt. PHA New York, NY, 10016	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 19.92	\$ 19.92
Date or dates debt was incurred 6/18/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ¹⁹ Priority creditor's name and mailing address Jeanette MacLean 371 Sargent Road Boxborough, MA, 01719	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 89.00	\$ 89.00
Date or dates debt was incurred 6/21/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim	Priority amount
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2. ²⁰ Priority creditor's name and mailing address Jessica DuLong 375 Lincoln Pl. #4B Brooklyn, NY, 11238	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 23.99	\$ 23.99
Date or dates debt was incurred 7/13/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ²¹ Priority creditor's name and mailing address Jessica Holmes 555 West 53rd Street Apt. 1062 New York, NY, 10019	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 66.75	\$ 66.75
Date or dates debt was incurred 6/20/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ²² Priority creditor's name and mailing address Jessica Van Dalsum 11 Dustin Dr Nashua, NH, 03062	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 29.88	\$ 29.88
Date or dates debt was incurred 06/22/20	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ²³ Priority creditor's name and mailing address Josh Diamond 414 Albemarle Road #5D Brooklyn, NY, 11218	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 27.39	\$ 27.39
Date or dates debt was incurred 6/21/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim	Priority amount
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2. ²⁴ Priority creditor's name and mailing address Judy Minkoff 529 W. 42nd Street Apt 8Z New York, NY, 10036	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 12.45	\$ 12.45
Date or dates debt was incurred 6/15/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2. ²⁵ Priority creditor's name and mailing address Juleen Yeoh 290 West End Ave Apt. 7C New York, NY, 10023	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 22.41	\$ 22.41
Date or dates debt was incurred 7/19/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2. ²⁶ Priority creditor's name and mailing address Kathryn Roland 67 Hilton Ave C4 Garden City, NY, 11530	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 12.45	\$ 12.45
Date or dates debt was incurred 6/15/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2. ²⁷ Priority creditor's name and mailing address Kingston Arrington 7067 Hawthorn Avenue Apt 12 Los Angeles, CA, 90028	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7.47	\$ 7.47
Date or dates debt was incurred 5/13/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim	Priority amount
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2. ²⁸ Priority creditor's name and mailing address Kumiko Matsumoto 7701 Woodmont Ave #303 Bethesda, MD, 20814	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 12.45	\$ 12.45
Date or dates debt was incurred 6/15/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ²⁹ Priority creditor's name and mailing address Larisa Courtien 68-46 Clyde Street Forest Hills, NY, 11375	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 24.90	\$ 24.90
Date or dates debt was incurred 6/20/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ³⁰ Priority creditor's name and mailing address Lia Simmons 1 Citoen Way Apt. 13F Parsippany, NJ, 07054	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 4.99	\$ 4.99
Date or dates debt was incurred 05/12/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ³¹ Priority creditor's name and mailing address Libby Tuttle 424 White Oak Drive Morton, IL, 61550	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7.47	\$ 7.47
Date or dates debt was incurred 5/13/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim	Priority amount
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2. ³² Priority creditor's name and mailing address Lin Jiao 10833 Wilshire Blvd/ Apt. 516 Los Angeles, CA, 90024	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 23.99	\$ 23.99
Date or dates debt was incurred 7/14/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ³³ Priority creditor's name and mailing address Lisa Cuzmici 978 Shelburne Drive Franklin Square, NY, 11010	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 267.00	\$ 267.00
Date or dates debt was incurred 6/12/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ³⁴ Priority creditor's name and mailing address Lisa Zucker 15 Phyllis Place Randolph, NJ, 07869	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 4.99	\$ 4.99
Date or dates debt was incurred 5/12/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ³⁵ Priority creditor's name and mailing address Meghan Carrelli 6 Fernwood Road Summit, NJ, 07901	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7.47	\$ 7.47
Date or dates debt was incurred 05/13/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2. ³⁶ Priority creditor's name and mailing address Melissa Patel 36 Hickory Street Metuchen, NJ, 08840	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 17.43	\$ 17.43
Date or dates debt was incurred 6/17/20	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ³⁷ Priority creditor's name and mailing address Michelle Michael 225 West 60th Street Apt 12B New York, NY, 10023	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 17.43	\$ 17.43
Date or dates debt was incurred 5/17/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ³⁸ Priority creditor's name and mailing address Mihoko Kondo 22 Fairview Ave Unit 2H New York, NY, 10040	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 23.99	\$ 23.99
Date or dates debt was incurred 7/19/20	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ³⁹ Priority creditor's name and mailing address Natalie Fleming 7717 Chatham Road Chevy Chase, MD, 20815	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 15.98	\$ 15.98
Date or dates debt was incurred 7/12/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2. ⁴⁰ Priority creditor's name and mailing address Natalie Olivier 5207 S Indiana Ave Unit 3 Chicago, IL, 60615	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 19.92	\$ 19.92
Date or dates debt was incurred 7/18/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2. ⁴¹ Priority creditor's name and mailing address Natasa Simovska-Poposki 555 West 52nd Street New York, NY, 10019	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7.47	\$ 7.47
Date or dates debt was incurred 5/13/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2. ⁴² Priority creditor's name and mailing address Natsuko Onuma 205 East 92nd Street Unit 25A New York, NY, 10128	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 23.99	\$ 23.99
Date or dates debt was incurred 7/23/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2. ⁴³ Priority creditor's name and mailing address Nichola Gray 71 East 77th Street Apt. 3C New York, NY, 10075	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7.47	\$ 7.47
Date or dates debt was incurred 5/13/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim	Priority amount
-------------	-----------------

2. ⁴⁴ Priority creditor's name and mailing address Raquel Federowicz 2631 Arlington Avenue Ridgewood, NY, 11385	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 12.45	\$ 12.45
Date or dates debt was incurred 5/15/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2. ⁴⁵ Priority creditor's name and mailing address Rebeca Abboud-Sieben 4 Laurel Lane Sherman, CT, 06784	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 66.75	\$ 66.75
Date or dates debt was incurred 8/3/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2. ⁴⁶ Priority creditor's name and mailing address Red Kardasz 10334 E Bahia Dr Scottsdale, AZ, 85255	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 14.94	\$ 14.94
Date or dates debt was incurred 7/16/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2. ⁴⁷ Priority creditor's name and mailing address Robin Love 612 Oak Street Apt 9L Key West, FL, 33040	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 19.92	\$ 19.92
Date or dates debt was incurred 5/18/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.⁴⁸ Priority creditor's name and mailing address Ruby Tull 2464B 8th Street Fort Lee, NJ, 07024	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7.47 \$ 7.47
Date or dates debt was incurred 05/13/2020	Basis for the claim: <u>Deposits by individuals</u>	
Last 4 digits of account number <u> </u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)		
<hr/>		
2.⁴⁹ Priority creditor's name and mailing address Samantha Fontanez 1521 Unionport Rd Unit 7B Bronx, NY, 10462	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7.47 \$ 7.47
Date or dates debt was incurred 5/13/2020	Basis for the claim: <u>Deposits by individuals</u>	
Last 4 digits of account number <u> </u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)		
<hr/>		
2.⁵⁰ Priority creditor's name and mailing address Sandhiya Mohan 160 Morgan Street Unit 1002 Jersey City, NJ, 07302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 31.99 \$ 31.99
Date or dates debt was incurred 7/14/2020	Basis for the claim: <u>Deposits by individuals</u>	
Last 4 digits of account number <u> </u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)		
<hr/>		
2.⁵¹ Priority creditor's name and mailing address Shannon McPherson 37 Martin Ln Englewood, CO, 80113	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 59.76 \$ 59.76
Date or dates debt was incurred 6/22/20	Basis for the claim: <u>Deposits by individuals</u>	
Last 4 digits of account number <u> </u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)		

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim	Priority amount
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2. ⁵² Priority creditor's name and mailing address Shengyin Gu 716 Almar Avenue Pacific Palisades, CA, 90272	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 23.99	\$ 23.99
Date or dates debt was incurred 7/10/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ⁵³ Priority creditor's name and mailing address Tamara Gostek 67 Belgrave Avenue Toronto, AL, M5M3S9	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 9.96	\$ 9.96
Date or dates debt was incurred 7/14/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ⁵⁴ Priority creditor's name and mailing address Tara Ellis 515 East 89th Street Apt. 4D New York, NY, 10128	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 66.75	\$ 66.75
Date or dates debt was incurred 6/24/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ⁵⁵ Priority creditor's name and mailing address Ursula Johnson 55 Midland Avenue Glen Ridge, NJ, 07028	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 15.98	\$ 15.98
Date or dates debt was incurred 7/9/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim	Priority amount
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2. ⁵⁶ Priority creditor's name and mailing address Victoria Frommer 25 East 83rd Street Apt 11E New York, NY, 10028	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 4.99	\$ 4.99
Date or dates debt was incurred 5/11/20	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ⁵⁷ Priority creditor's name and mailing address Yukari Rymar 2650 39th St NW Apt 1 Washington, DC, 20007	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 17.43	\$ 17.43
Date or dates debt was incurred 5/17/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. ⁵⁸ Priority creditor's name and mailing address Yuko Hirao 14916 Piney Grove Ct North Potomac, MD, 20878	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 15.98	\$ 15.98
Date or dates debt was incurred 7/15/2020	Basis for the claim: Deposits by individuals		
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)			
2. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____	\$ _____
Date or dates debt was incurred	Basis for the claim:		
Last 4 digits of account number	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)			

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	
		Amount of claim	Check all that apply.
3.1	Alison Stumpf 400 East 20th Street Apt. MA New York, NY, 10009	\$ 20.00	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		Basis for the claim:	Uncashed check - classroom supplies
	Date or dates debt was incurred	7/2/2020	Is the claim subject to offset?
	Last 4 digits of account number		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2	Austin Parker 4646 Broadway Apt 49 New York, NY, 10040	\$ 75.00	As of the petition filing date, the claim is: Check all that apply.
			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		Basis for the claim:	Uncashed check - classroom supplies
	Date or dates debt was incurred	5/12/2020	Is the claim subject to offset?
	Last 4 digits of account number		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.3	BankDirect Capital Finance, LLC P.O. Box 660448 Dallas, TX, 75266-0448	\$ 2,131.27	As of the petition filing date, the claim is: Check all that apply.
			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		Basis for the claim:	Suppliers or Vendors
	Date or dates debt was incurred		Is the claim subject to offset?
	Last 4 digits of account number		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4	BDO USA, LLP P.O. Box 642743 Pittsburgh, PA, 15264-2743	\$ 5,470.00	As of the petition filing date, the claim is: Check all that apply.
			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		Basis for the claim:	Services
	Date or dates debt was incurred		Is the claim subject to offset?
	Last 4 digits of account number		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5	Benjamin R. Norton 410 Merrick Ave East Meadow, NY, 11554	\$ 400.00	As of the petition filing date, the claim is: Check all that apply.
			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		Basis for the claim:	Uncashed check - classroom supplies
	Date or dates debt was incurred	Various	Is the claim subject to offset?
	Last 4 digits of account number		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6	Brynne Kaynak 2052 Dennis Lane Bethlehem, PA, 18015	\$ 22.00	As of the petition filing date, the claim is: Check all that apply.
			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		Basis for the claim:	Uncashed check - classroom supplies
	Date or dates debt was incurred	6/4/2020	Is the claim subject to offset?
	Last 4 digits of account number		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ⁷ Nonpriority creditor's name and mailing address Customers Bank 701 Reading Avenue Reading, PA, 19611	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Monies Loaned / Advanced	\$ 461,241.00
Date or dates debt was incurred 04/15/2020	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		
3. ⁸ Nonpriority creditor's name and mailing address Douglas Emmett 1998, LLC 1299 Ocean Avenue Suite 1000 Los Angeles, CA, 90049	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Guaranty of Lease - Brentwood	\$ 0.00
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁹ Nonpriority creditor's name and mailing address Fedex PO Box 371461 Pittsburgh, PA, 15250-7461	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors	\$ 54.14
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁰ Nonpriority creditor's name and mailing address Megan Tischhauser 411 East 78th Street Apt. 1A 10075	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Uncashed check - classroom supplies	\$ 0.00
Date or dates debt was incurred 7/2/2020	Is the claim subject to offset?	
Last 4 digits of account number	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹¹ Nonpriority creditor's name and mailing address Philadelphia Insurance Companies PO Box 70251 Philadelphia, PA, 19176	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Premium	\$ 0.00
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹²	Nonpriority creditor's name and mailing address Street Retail Inc. 1626 E Jefferson Street Attn: Robyn Sarrat Rockville, MD, 20852	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Guaranty of lease	\$ 0.00
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3. ¹³	Nonpriority creditor's name and mailing address The Hartford PO Box 660916 Dallas, TX, 75266-0916	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Premium	\$ 26,914.45
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3. ¹⁴	Nonpriority creditor's name and mailing address Voya Financial PO Box 75131 Charlotte, NC, 28275-0131	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors	\$ 375.00
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3. ¹⁵	Nonpriority creditor's name and mailing address Worthy of Love 5550 Grosvenor Blvd. #312 Los Angeles, CA, 90066	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Uncashed check - classroom supplies	\$ 95.16
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3.	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:	\$ _____
Date or dates debt was incurred _____		Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
Last 4 digits of account number _____			

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1. Internal Revenue Service Centralized Insolvency Operation PO Box 7436 Philadelphia, PA, 19101-7346	Line _____ <input checked="" type="checkbox"/> Not listed. Explain: Notice Purposes Only	_____
4.2. New York State Dept of Taxation and Finance Bankruptcy Section PO Box 5300 Albany, NY, 12205-0300	Line _____ <input checked="" type="checkbox"/> Not listed. Explain Notice Purposes Only	_____
4.3.	Line _____ <input type="checkbox"/> Not listed. Explain	_____
4.4.	Line _____ <input type="checkbox"/> Not listed. Explain	_____
4.5.	Line _____ <input type="checkbox"/> Not listed. Explain	_____
4.6.	Line _____ <input type="checkbox"/> Not listed. Explain	_____
4.7.	Line _____ <input type="checkbox"/> Not listed. Explain	_____
4.8.	Line _____ <input type="checkbox"/> Not listed. Explain	_____
4.9.	Line _____ <input type="checkbox"/> Not listed. Explain	_____
4.10.	Line _____ <input type="checkbox"/> Not listed. Explain	_____
4.11.	Line _____ <input type="checkbox"/> Not listed. Explain	_____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**5. Add the amounts of priority and nonpriority unsecured claims.**

		Total of claim amounts
5a. Total claims from Part 1	5a.	\$ 2,177.84
5b. Total claims from Part 2	5b. +	\$ 496,798.02
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	\$ 498,975.86

Fill in this information to identify the case:

Debtor name Kidville OpcO, LLC
 United States Bankruptcy Court for the: Southern District of New York
 Case number (If known): _____ Chapter 7 _____

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

		State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease	
2.1	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Guaranty of Brentwood lease Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	Douglas Emmett 1998, LLC 1299 Ocean Avenue Suite 1000 Santa Monica, CA, 90401	
2.2	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Employment Agreement</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	Harry R. Harwood Jr. PO Box 3827 New York, NY, 10163	
2.3	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Escrow Agreement dated February 10, 2020 Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	Kidville, Inc.	
2.4	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>		
2.5	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>		

Fill in this information to identify the case:Debtor name Kidville Opco, LLCUnited States Bankruptcy Court for the: Southern District of New York

Case number (if known): _____

 Check if this is an amended filing**Official Form 206H****Schedule H: Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

	Column 1: Codebtor	Column 2: Creditor		
	Name	Mailing address	Name	
2.1	Kidville Bethesda, LLC	Kidville Bethesda, LLC PO Box 3827 New York, NY 10163	Street Retail Inc.	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.2	Kidville Brentwood, L	Kidville Brentwood, LLC PO Box 3827 101636	Douglas Emmett 1998, LL	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.3				<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4				<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.5				<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6				<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name	Kidville Opco, LLC
United States Bankruptcy Court for the: Southern District of New York	
Case number (If known):	_____

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year			Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From <u>02/10/2020</u> <u>MM / DD / YYYY</u>	to	Filing date	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other \$ <u>61,894.09</u>
For prior year:	From <u> </u> <u>MM / DD / YYYY</u>	to	<u> </u> <u>MM / DD / YYYY</u>	<input type="checkbox"/> Operating a business <input type="checkbox"/> Other \$ <u>0.00</u>
For the year before that:	From <u> </u> <u>MM / DD / YYYY</u>	to	<u> </u> <u>MM / DD / YYYY</u>	<input type="checkbox"/> Operating a business <input type="checkbox"/> Other \$ <u>0.00</u>

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None

			Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From <u>02/10/2020</u> <u>MM / DD / YYYY</u>	to	Filing date	\$ <u>0.00</u>
For prior year:	From <u> </u> <u>MM / DD / YYYY</u>	to	<u> </u> <u>MM / DD / YYYY</u>	\$ <u>0.00</u>
For the year before that:	From <u> </u> <u>MM / DD / YYYY</u>	to	<u> </u> <u>MM / DD / YYYY</u>	\$ <u>0.00</u>

Debtor Kidville Opco, LLC _____ Case number (if known) _____
Name _____

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. Kidville, Inc. Creditor's name PO Box 3827 New York, NY 10163	_____ _____ _____	\$ 48,462.77	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other _____
3.2. Kidville Franchise Company, LLC Creditor's name PO Box 3827 New York, NY 10163	_____ _____ _____	\$ 9,315.35	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. Insider's name _____ _____ _____	_____	\$ _____	
Relationship to debtor _____	_____	\$ _____	
4.2. Insider's name _____ _____ _____	_____	\$ _____	
Relationship to debtor _____	_____	\$ _____	

Debtor Kidville Opco, LLC _____ Case number (if known) _____
Name _____

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

None

Creditor's name and address	Description of the property	Date	Value of property
5.1. Creditor's name _____	_____	_____	\$ _____

5.2.

Creditor's name _____ \$ _____

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name _____	_____	_____	\$ _____

Last 4 digits of account number: XXXX- _____

Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None

Case title	Nature of case	Court or agency's name and address	Status of case
7.1. Case number _____	_____	_____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

7.2.

Case title	Court or agency's name and address	Pending
Case number _____	_____	<input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor Kidville Opco, LLC
Name _____

Case number (if known) _____

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

Custodian's name and address	Description of the property	Value
_____	_____	\$ _____
Custodian's name	Case title	Court name and address
_____	_____	_____
Case number		Name
_____	_____	_____
Date of order or assignment		_____
_____	_____	_____

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Recipient's name	_____	_____	\$ _____
	_____	_____	\$ _____

Recipient's relationship to debtor

9.1. Recipient's name	_____	\$ _____
	_____	\$ _____

Recipient's relationship to debtor

9.2. Recipient's name	_____	\$ _____
	_____	\$ _____

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Date of loss	Value of property lost \$ _____
_____	_____	_____	\$ _____

Debtor Kidville Opco, LLC _____ Case number (if known) _____
Name _____

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None

Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1. _____ Address _____	_____	_____	\$ _____

Email or website address

Who made the payment, if not debtor?

Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2. _____ Address _____	_____	_____	\$ _____

Email or website address

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
Trustee _____ _____	_____	_____	\$ _____

Debtor Kidville Opco, LLC
Name _____

Case number (if known) _____

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
------------------------	--	------------------------	-----------------------

13.1. _____ \$ _____

Address _____

Relationship to debtor _____

Who received transfer? _____ \$ _____

13.2. _____

Address _____

Relationship to debtor _____

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy
---------	--------------------

14.1. 163 East 84th Street
New York, NY 10028 From 02/2020 To 07/2020

14.2. From _____ To _____

Debtor Kidville Opco, LLC _____ Case number (if known) _____
Name _____

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

No. Go to Part 9.

Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	--	---

15.1. _____ Facility name _____

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- Electronically
- Paper

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	--	---

15.2. _____ Facility name _____

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- Electronically
- Paper

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

No.

Yes. State the nature of the information collected and retained. Personally Identifiable Information

Does the debtor have a privacy policy about that information?

- No
- Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

No. Go to Part 10.

Yes. Does the debtor serve as plan administrator?

- No. Go to Part 10.
- Yes. Fill in below:

Name of plan _____

Employer identification number of the plan _____

EIN: _____

Has the plan been terminated?

- No
- Yes

Debtor Kidville Opco, LLC
Name _____

Case number (if known) _____

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. Name _____	XXXX-_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
18.2. Name _____	XXXX-_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

 None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
<input type="text"/> Name _____			<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

Facility name and address	Names of anyone with access to it	Description of the contents		Does debtor still have it?
Vastnet <u>Name</u> 900 Walt Whitman Rd Melville, NY 11747		Server/books & records		<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Debtor Kidville OpcO, LLC
Name _____

Case number (if known) _____

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

Owner's name and address	Location of the property	Description of the property	Value
Name _____			\$ _____

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number _____	Name _____		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____		_____

Debtor Kidville Opco, LLC
Name _____

Case number (if known) _____

24. Has the debtor notified any governmental unit of any release of hazardous material?

- No
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- None

Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. Kidville NY, LLC Name PO Box 3827 New York, NY 10163	EIN: _____ Dates business existed From _____ To _____	
25.2. Kidville Franchise Company, LLC Name PO Box 3827 New York, NY 10163	EIN: _____ Dates business existed From _____ To _____	
25.3. Kidville Lincoln Park, ILC Name PO Box 3827 New York, NY 10163	EIN: _____ Dates business existed From _____ To _____	

Debtor Kidville Opco, LLC
Name _____

Case number (if known) _____

26. Books, records, and financial statements

- 26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

None

Name and address	Dates of service
26a.1. Carlos Mercado Name PO Box 3827, New York, NY 10163	From 02/10/2020 To 07/28/2020

Name and address	Dates of service
26a.2. _____ Name _____	From _____ To _____

- 26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

None

Name and address	Dates of service
26b.1. _____ Name _____	From _____ To _____

Name and address	Dates of service
26b.2. _____ Name _____	From _____ To _____

- 26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

None

Name and address	If any books of account and records are unavailable, explain why
26c.1. Harry R. Harwood Jr. Name PO Box 3827, New York, NY 10163	

Debtor Kidville Opco, LLC _____ Case number (if known) _____
Name _____

Name and address

If any books of account and records are
unavailable, explain why

26c.2.

Name _____

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

None

Name and address

26d.1.

N/A

Name _____

Name and address

26d.2.

Name _____

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

No

Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

**Date of
inventory**

**The dollar amount and basis (cost, market, or
other basis) of each inventory**

\$ _____

Name and address of the person who has possession of inventory records

27.1.

Name _____

Debtor Kidville Opco, LLC _____ Case number (if known) _____
Name _____

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
_____	_____	\$ _____

Name and address of the person who has possession of inventory records

27.2. _____

Name _____

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Kidville Holdings, LLC	PO Box 3827, New York, NY 10163	Managing Member	99
Kidville Management, Corp.	PO Box 3827, New York, NY 10163	Member	1

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No

Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
_____	_____	_____	To _____
_____	_____	_____	To _____
_____	_____	_____	To _____
_____	_____	_____	To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

No

Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1. _____ Name _____	_____	_____	_____
Relationship to debtor	_____	_____	_____

Debtor Kidville OpcO, LLC
Name _____

Case number (if known) _____

Name and address of recipient

30.2

Name _____

Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- No
 Yes. Identify below.

Name of the parent corporation

Kidville OpcO, LLC

Employer Identification number of the parent corporation

EIN: 84-4152598

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- No
 Yes. Identify below.

Name of the pension fund

Kidville, Inc. 401k Plan 805935

Employer Identification number of the pension fund

EIN: 76-0763470

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 08/08/2020
MM / DD / YYYY

 /s/ Harry R. Harwood Jr.

Printed name Harry R. Harwood Jr.

Signature of individual signing on behalf of the debtor

Position or relationship to debtor Authorized Signatory

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- No
 Yes

Continuation Sheet for Official Form 207**3) Certain payments or transfers to creditors within 90 days before filing this case**

Paycom Payroll, LLC, \$205,339.97
7501 West Memorial Road,
Oklahoma City, OK 73142

Voya Financial, P.O. Box \$7,904.81
75131, Charlotte, NC
28275

Frejka PLLC, 420 \$30,000.00
Lexington Avenue Suite
310, New York, NY 10170

Scott M. Sosnik, CPA LLC, \$8,995.00
715 Holly Court,
Norwood, NJ 07648

17) Pension Contributions

Kidville, Inc. 401k Plan 76-0763470
805935

25) Other businesses in which the debtor has or has had an interest

Kidville Garden City, LLC PO Box 3827, New York,
NY 10163

Kidville Besthesda, LLC PO Box 3827, New York,
NY 10163

Kidville Brentwood, LLC PO Box 3827, New York,
NY 10163

Kidville Union Square, LLC PO Box 3827, New York,
NY 10163

31) Tax consolidation groups

No

United States Bankruptcy Court

IN RE:

Kidville Opco, LLC

Case No. _____

Chapter 7 _____

LIST OF EQUITY SECURITY HOLDERS

Registered name and last known address of security holder	Shares (Or Percentage)	Security Class (or kind of interest)
Kidville Holdings, LLC PO Box 3827, New York, NY 10163	99	
Kidville Management, Corp. PO Box 3827, New York, NY 10163	1	Limited partner

Fill in this information to identify the case and this filing:

Debtor Name	Kidville Opco, LLC
United States Bankruptcy Court for the:	Southern District of New York
Case number (If known):	_____

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- Schedule H: Codebtors (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
- Amended Schedule _____
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 08/08/2020
MM / DD / YYYY

 /s/ Harry R. Harwood Jr.

Signature of individual signing on behalf of debtor

Harry R. Harwood Jr.

Printed name

Authorized Signatory

Position or relationship to debtor

United States Bankruptcy Court
Southern District of New York

In re: Kidville OpcO, LLC

Case No.

Chapter 7

Debtor(s)

Verification of Creditor Matrix

The above-named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: 08/08/2020

/s/ Harry R. Harwood Jr.

Signature of Individual signing on behalf of debtor

Authorized Signatory

Position or relationship to debtor

Adriana Gonzalez
40 Amsterdam Avenue
Apt. 13F
New York, NY 10023

Camille Matlack
33 Caton Place
Unit 3J
Brooklyn, NY 11218

Alison Stumpf
400 East 20th Street
Apt. MA
New York, NY 10009

Camille Wynn
125 Delancey Street
PH02
New York, NY 10002

Alma Leon
225 Willow Lane
Valley Stream, NY 11580

Christina Giuliani
550 West 54th Street
Unit 31B
New York, NY 10019

Andrea Fiore
511 East 80th Street
Apt. 9G
New York, NY 10075

Christine Hendon
2631 Arlington Ave
Bronx, NY 10463

Aneliya Crawford
510 West 52nd Street
Apt PH1H
New York, NY 10019

Courtney McGraw
PO Box 146
Edgewater, NJ 07020

Austin Parker
4646 Broadway
Apt 49
New York, NY 10040

Courtney Staffeld
305 East 86th Street
Apt. 22GW
New York, NY 10028

Aysulu Mardanova
3311 Riverview Ave
Englewood, NJ 07631

Customers Bank
701 Reading Avenue
Reading, PA 19611

BankDirect Capital Finance, LLC
P.O. Box 660448
Dallas, TX 75266-0448

Dana Mazo
100 Jay Street
Unit 30D
Brooklyn, NY 11201

BDO USA, LLP
P.O. Box 642743
Pittsburgh, PA 15264-2743

Darryl Chiang
940 Park Avenue
Apt. 7B
New York, NY 10028

Benjamin R. Norton
410 Merrick Ave
East Meadow, NY 11554

David Choi
110 West 90th Street
New York, NY 10024

Brynne Kaynak
2052 Dennis Lane
Bethlehem, PA 18015

Douglas Emmett 1998, LLC
1299 Ocean Avenue
Suite 1000
Los Angeles, CA 90049

Douglas Emmett 1998, LLC
1299 Ocean Avenue
Suite 1000
Santa Monica, CA 90401

Jessica Van Dalsum
11 Dustin Dr
Nashua, NH 03062

Emma Ye
408 W Main St
Unit 3C
Alhambra, CA 91801

Josh Diamond
414 Albemarle Road
Brooklyn, NY 11218

Ester Vallet
350 West 42nd St.
Apt. 55D
New York, NY 10036

Judy Minkoff
529 W. 42nd Street
Apt 8Z
New York, NY 10036

Eva Bonime
180 West End Avenue
Apt. 3F
New York, NY 10023

Juleen Yeoh
290 West End Ave
Apt. 7C
New York, NY 10023

Fedex
PO Box 371461
Pittsburgh, PA 15250-7461

Kathryn Roland
67 Hilton Ave
C4
Garden City, NY 11530

Harry R. Harwood Jr.
PO Box 3827
New York, NY 10163

Kidville Brentwood, LLC
PO Box 3827

Internal Revenue Service
Centralized Insolvency Operation
PO Box 7436
Philadelphia, PA 19101-7346

Kingston Arrington
7067 Hawthorn Avenue
Apt 12
Los Angeles, CA 90028

Jason Hsu
150 East 37th Street
Apt. PHA
New York, NY 10016

Kumiko Matsumoto
7701 Woodmont Ave
Bethesda, MD 20814

Jeanette MacLean
371 Sargent Road
Boxborough, MA 01719

Larisa Courtien
68-46 Clyde Street
Forest Hills, NY 11375

Jessica DuLong
375 Lincoln Pl.
Brooklyn, NY 11238

Lia Simmons
1 Citoen Way
Apt. 13F
Parsippany, NJ 07054

Jessica Holmes
555 West 53rd Street
Apt. 1062
New York, NY 10019

Libby Tuttle
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United States Bankruptcy Court

Southern District of New York

In re Kidville Opco, LLC

Case No. _____

Debtor

Chapter ⁷ _____

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

- Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

FLAT FEE

For legal services, I have agreed to accept	\$ 6,320.00
Prior to the filing of this statement I have received.....	\$ 6,320.00
Balance Due.....	\$ 0.00

RETAINER

For legal services, I have agreed to accept a retainer of	\$ _____
The undersigned shall bill against the retainer at an hourly rate of	\$ _____
[Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.	

- The source of the compensation paid to me was:

Debtor Other (specify)

- The source of compensation to be paid to me is:

Debtor Other (specify)

- I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the Agreement, together with a list of the names of the people sharing the compensation is attached.

- In return of the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

d. [Other provisions as needed]

- ? All consultations to prepare and file the original petition, schedules and accompanying documents as required by the United State Bankruptcy Code;
- ? Preparation of the written consent to the filing, schedules and accompanying documents as required by the United State Bankruptcy Code;
- ? Special written and/or telephone notice to creditors advising them of the Court's automatic stay. The Bankruptcy Court will provide notice official notice to all creditors within three (3) to four (4) weeks of filing;
- ? Appearance at initial, and any continued, meeting of creditors;
- ? Communications with creditors and Chapter 7 Trustee and responding to inquiries regarding the bankruptcy filing; and
- ? General communications with Client throughout the period of the bankruptcy

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

N/A

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

08/08/2020

/s/ Elise S. Frejka, EF6896

Date

Signature of Attorney

Frejka PLLC

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New York, NY 10170
(212) 641-0800
efrejka@frejka.com